## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			4				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
то	TAL CHARGEA	BLE CLAIMS	び minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ m	inus 3 =	*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							l	+140=		OR	+280=	
* If	the difference	in column 1 is	less than z	ero, entei	r "0" in c	olumn 2	-	TOTAL		OR	TOTAL	750
	C	LAIMS AS A	MENDE			g	lumn 3) SMALL I			OR	OTHER SMALL	
		(Column 1) CLAIMS		(Colur		(Column 3)	4 .	SWALL		UH I I	SIVIALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN <sup>*</sup>	T CLAIM		Ì	+140=	<del></del>	OR	+280=	
	TOTAL										TOTAL	
		A	ADDIT. FEE		OR	ADDIT. FEE						
		(Column 1) CLAIMS	T	(Colu		(Column 3)	1 -			- 34		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	ÌÌ	X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM		1	+140=		OR	+280=	
							L	TOTAL ADDIT. FEE		OB.	TOTAL ADDIT. FEE	
			ODII. PEE			ADDIT. I EL						
AMENDMENT C		CLAIMS REMAINING AFTER		PREVI	IBER OUSLY	PRESENT EXTRA	۱ [	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total	AMENDMENT	Minus		FOR		-		FEE		<b> </b>	FEE
	Total Independent	*	Minus Minus	**		=		X\$ 9=		OR	X\$18=	
		* NTATION OF M	<u> </u>	PENDEN	T CLAIM			X42=		OR	X84=	ļ
	<u> </u>				· _	<u></u>	<b>,</b> [	+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE ADDIT. FEE											
		nber Previously Pa					er fou	nd in the apr	propriate bo	x in co	lumn 1.	